

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1			2			51		1				
2		1		2			52		1				
3		1		2			53		1				
4		1		2			54		1				
5		1		2			55		1				
6		1		2			56		1				
7		1		2			57	1					
8		1		2			58		1				
9		1		2			59		1				
10		1		2			60		1				
11		1		1			61		2				
12		1		1			62		2				
13		1		2			63		2				
14		1		2			64		2				
15		1		1			65		2				
16		1		1			66		2				
17		1		2			67		2				
18	1						68		2				
19		1					69		2				
20		1					70		2				
21		1					71		2				
22		2					72		2				
23		2					73		2				
24		2					74		2				
25		2					75		2				
26		2					76		1				
27		2					77		1				
28		2					78		2				
29		2					79	1					
30		2					80		1				
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32		2					82		1				
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34		1					84		1				
35		2					85		1				
36		2					86		1				
37		1					87		1				
38		1					88		1				
39		2					89		1				
40	1						90		1				
41		1					91		1				
42		1					92		1				
43		1					93		1				
44		1					94		1				
45		1					95		1				
46		1					96	1					
47		1					97		1				
48		1					98		1				
49		1					99		1				
50		1					100		2				
TOTAL IND.	3						TOTAL IND.	3		6			
TOTAL DEP.	61		30				TOTAL DEP.	64		53			
TOTAL CLAIMS							TOTAL CLAIMS			101			

Best Available Copy

Best Available Copy

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09539723

FILING DATE

3-30-00

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND.		DEP.		IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								